



PTO/SB/22 (12-97)
Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
16715 CPA

#17 MMT 9-19-00

PETITION FOR EXTENSION OF	TIME UNDER 3	7 CFR 1.136(a)	16715CPA	
	In re Application of William J. Rea, MD, et al.			
	Application Num 08/902,692	per F	iled 7/30/97	
	For Autogenous Lymphatic Facaor For Modification of T and B Lymphocyte Parmeters			
	Group Art Unit 1644	Examiner Schwardon, R.		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.				
The requested extension and a (check time period desired):	appropriate non-s	small-entity fee are	as follows	
One month (37 CFR 1.17(a)(1))			\$	
Two months (37 CFR 1.17(a)(2))		\$		
Three months (37 CFR 1.17(a)(3))		\$870		
Four months (37 CFR 1.17(a)(4))			\$	
Five months (37 CFR	Five months (37 CFR 1.17 (a)(5))			
Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$435 A small entity statement under 37 CFR 1.27: is enclosed. x has already been filed in this application.				
A should in the source	A check in the amount of the fee is enclosed.			
The Commissioner has already been authorized to charge fees in this application to a Deposit Account.				
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-3840 . I have enclosed a duplicate copy of this sheet.				
I am the assignee of record of the entire interest.				
applicant. x attorney or agent of record.				
attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a).				
09/11/00 Date	_	Jodd [1	Mane Signature	
	Todd E. Albanesi			
		Typed	or printed name	

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.